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	<u> </u>	UTILITY Attorney Docket No. 35.G1		35.G1972 Div.	I ** °	~ .				
_	PATENT APPLICATION First Named				ed Inventor or App	d Inventor or Application Identifier				
5	Qnly t	for new nong	TRANSMITTAL provisional applications und	_ der 37 CFR 1 53/b))	Н	HIROYOSHI KISHI			*& =	
\ \ \	- G					xpress Mail	Label No.			54.8
	omple d		PPLICATION ELEMI 600 concerning utility pater		ts.	ADDR	ESS TO	Box Pat	sioner for Patents ent Application gton, DC 20231	10/0
, -	1.		mittal Form original, and a duplicate for fee	processing)		7.	CD-ROM Program (or CD-R in duplica	te, large table or C	omputer
ž	2. Applicant claims small entity status. See 37 CFR 1.27. 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)							ission		
	3. X	Specification	on <i>Total F</i>	Pages 51			a	Computer Readab	ole Form (CRF)	
	4. X	Drawing(s)	(35 USC 113) Total S	Sheets 14			b. Specific	cation Sequence L		
1000	5. X	Oath or De	claration Total F	Pages 3			ii.	paper	(= 000,000), 0.	
	Aver if a to a second	a N	Newly executed (original or	сору)	1				ng identity of above	copies
;		b. Copy from a prior application (37 CFR 1.63(d)) ACCOMPANYING APPLICATION					CATION PARTS			
Service Comments		[X] (1	for continuation/divisional wi	th Box 17 completed)	'	9	Assignment	Papers (cover shee	t & document(s))	
	indi B Conin	i.	DELETION OF IN Signed Statement a named in the prior a	NVENTOR(S) attached deleting inven application, see 37 CFI	tor(s)	10.		3(b) Statement re is an assignee)	Power of	of Attorney
	reli : F——		1 63(d)(2) and 1.33			11.		anslation Documer		
	6. X		Data Sheet. See 37 CFR	ETROUIS THE	645	12	Statement	Disclosure (IDS)/PTO-1449	Copies Citation	
		i in	Date of Deposit Nov / preby certify that this paper or	fee is being deposited			_	/ Amendment ceipt Postcard (MF	PEP 5031	
			th the United States Poetal Se et Office to Addresses servi the date indicated above a	ce under 37 CFR 1.10		14. X	(Should be	specifically itemiz	ed)	
	Complesioner for Patents, Westington, D. C. 2023				15.	Certified Copy of Priority Document(s) (if foreign priority is claimed)				
					İ	16	Other:	Juner:		
(Signature of person realiting paper or fee)										
	17. If a C	ONTINUING	APPLICATION, check ap	propriate box and s	upply th	ne requisite i	nformation:			
	Prior applic	Continuati		Continu	uation-i	in-part (CIP)	of prior app Group/Art U	lication No. <u>08 /87</u>	8,128	
	For CONTI	NUATION OF	R DIVISIONAL APPS only: The	ne entire disclosure of t	the prior	application. fi	rom which an	anth or declaration	s supplied under Po	5h is
-			disclosure of the accompanyir on has been inadvertently omi	tted from the submitted	ionai api d applica	plication and i ation parts.	s hereby inco	rporated by reference	e. The incorporation	can only be
ŀ				18. CORRE	SPONDI 0551	ENCE ADDRI	ESS	_		
-	X Cı	Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label tiere) or Correspondence address below								
-	NAME								W	
	Address									
F	City			State				Zip Code		
L	Country			Telephone				Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS			
30 th	TOTAL CLAIMS (37 CFR 1.16(c))	11-20 =	0	X \$ 18.00 =	\$.00			
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 =	0	X \$ 84.00 =	\$.00			
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$280.00 =							
				BASIC FEE (37 CFR 1.16(a))	\$ 740.00			
			Total of	above Calculations =	\$			
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).				
	TOTAL =							
					on position			
a. b. c. 20.	Small entity status a.							

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	PETER SAXON		
SIGNATURE	Relendarion		
DATE	November 13, 2001		

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